

Workshop

Food packaging and chemical safety: What does the future hold?

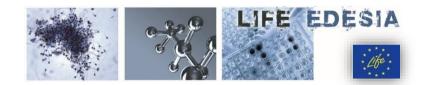
8 October 2015

Animal free (toxicological) screening of plasticizer alternatives

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ISS - Istituto Superiore di Sanità Department of Food Safety and Veterinary Public Health





OUTLINE

- \checkmark Why to search for plasticizer alternatives?
- ✓ Endocrine Disruption and adverse effects
- ✓ Endocrine Disruptor (ED)-screening: mechanism-based *versus* effect-based
- The *in vitro* LIFE-EDESIA approach: Biomarker-based, cell-specific bioassays as the best screening approach to build an Adverse Outcome Pathway for Endocrine Disruption

Endocrine Disruptors *in silico / in vitro* Evaluation and Substitution for Industrial Applications

LIFE12 ENV/IT/000633





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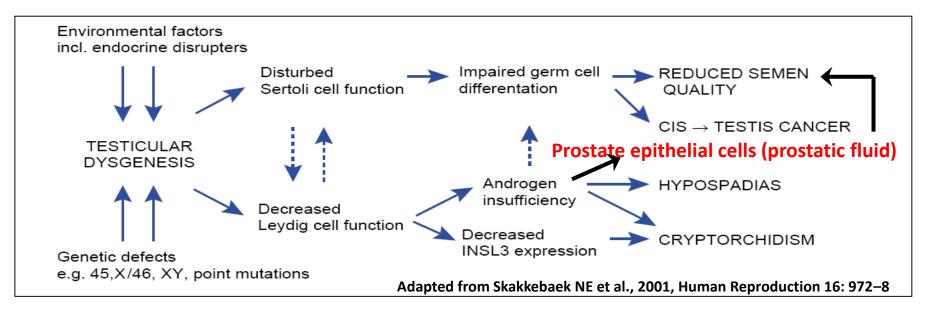
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> Testicular Dysgenesis Syndrome (TDS) in humans

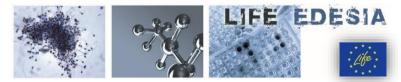
exposure *in utero* to environmental factors (anti-androgenic compounds) in Western Europe and USA are responsible of male infertility and associated-diseases/malformations.

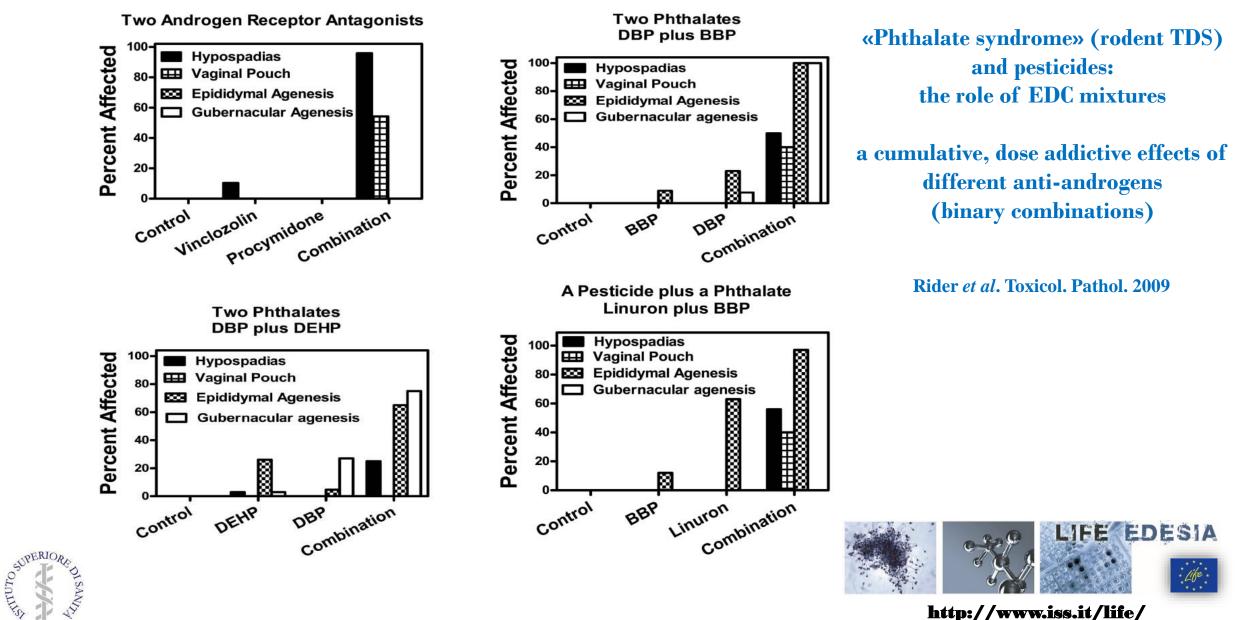


or «phthalate syndrome» in experimental rodents

Fisher, Reproduction 2004 Sharpe and Skakkebaek, Fertil Steril. 2008 Martinez-Arguelles *et al.*, JSBMB 2013







Obesogenic EDCs (including BPA and DEHP) in experimental *in vivo* models and in humans (?)



COMMENTARY

DOI 10.1186/s12940-015-0042-7

Heindel et al. Environmental Health (2015) 14:54

Open Access

CrossMark

Parma consensus statement on metabolic disruptors

Heindel et al., Env. Health 2015, and refs therein

Grün and Blumberg, Endocrinology 2006

Summary and conclusions

The Parma workshop helped to focus this emerging field by developing an overarching hypothesis for the role of environmental chemicals in the current worldwide epidemics of obesity, diabetes and related metabolic diseases. We hope that the consensus statements will aid in expanding understanding of the possible role of metabolic disruptors in these epidemics and have identified research needs in order to provide more relevant data on the role of environmental chemicals in these diseases. The objective is both to indicate the strength of the current data and to provide a roadmap for further studies. A coherent, enhanced research agenda will help identify strategies to prevent metabolic diseases through actions that can be taken by individuals as well as public health agencies. History shows that prevention is always the best strategy. Increased understanding of the importance of the metabolic disruptor hypothesis to the epidemics of obesity and metabolic syndrome offers the potential for these diseases to be mitigated by modifying exposures, thereby creating a healthier environment for future generations.

OLDITH'S

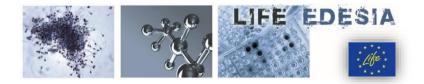
> EU regulatory framework

The EU has introduced specific legislative obligations aimed at *phasing out endocrine disruptors* in **water** (*Water Framework Directive 2000/60/EC*), **industrial chemicals** (*REACH Regulation 2006/1907/EC*, *Food Contact Materials Regulation 2011/10/EU* and following amendments, ...), **plant protection products** (*Plant Protection Products Regulation 2009/1107/EC*) and **biocides** (*Biocidal Products Regulation 2012/528/EU*).

Importantly, EU regulations strongly recommended the use of in vitro alternative (to animal experimentation) methods, at least as a prioritizing screening approach to identify endocrine disrupting properties of Endocrine Active Substances (EAS).

REACH Regulation

- In REACH, Endocrine Disrupting Chemicals (EDCs) are considered of similar regulatory concern as Substances of Very High Concern (SVHC).
- REACH also calls for the progressive substitution of the most dangerous chemicals (referred to as SVHC) when suitable alternatives have been identified.





Candidate List of Substances of Very High Concern (SVHCs) for Authorisation: 151 entries (updated: 16 December 2013)

	14							
Substance name	EC number	CAS	Date of	Reason for	Decision	IUCLID 5	details	
		number	inclusion	inclusion	number	substance		
						dataset		
Di- <i>n</i> -hexyl phthalate (DNHP)	201-559-5	84-75-3	2013/12/16	Toxic for reproduction (Article 57 c)	ED/121/2013		Х	
Di-n-pentyl phthalate (DNPP)	205-017-9	131-18-0	2013/06/20	Toxic for reproduction (Article 57 c)	ED/69/2013		Х	
N-pentyl-isopentyl phthalate	-	776297-69-9	2012/12/19	Toxic for reproduction (Article 57 c)	ED/169/2012		Х	
Diisopentylphthalate (DIPP)	210-088-4	605-50-5	2012/12/19	Toxic for reproduction (Article 57 c)	ED/169/2012		Х	
Bis (2-methoxyethyl) phthalate (DMEP)	204-212-6	117-82-8	2011/12/19	Toxic for reproduction (Article 57 c)	ED/77/2011		Х	
Diisobutyl phthalate (DIBP)	201-553-2	84-69-5	2010/01/13	Toxic for reproduction (Article 57 c)	ED/68/2009		Х	
Benzylbutyl phthalate (BBP)	201-622-7	85-68-7	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		Х	
Bis (2-ethylhexyl) phthalate (DEHP)	204-211-0	117-81-7	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		Х	
Dibutyl phthalate (DBP)	201-557-4	84-74-2	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		Х	Pa s



http://www.iss.it/life/

EDESIA

Candidate List of Substances of Very High Concern (SVHCs) for Authorisation: 151 entries (updated: 16 December 2013)

Substance name	EC number	CAS	Date of	Reason for	Decision	IUCLID 5	details
		number	inclusion	inclusion	number	substance	
						dataset	
Di- <i>n</i> -hexyl phthalate (DNHP)	201-559-5	84-75-3	2013/12/16	Toxic for reproduction (Article 57 c)	ED/121/2013		X
Di- <i>n</i> -pentyl phthalate (DNPP)	205-017-9	131-18-0	2013/06/20	Toxic for reproduction (Article 57 c)	ED/69/2013		Х
N-pentyl-isopentyl phthalate	-	776297-69-9	2012/12/19	Toxic for reproduction (Article 57 c)	ED/169/2012		Х
Diisopentylphthalate (DIPP)	210-088-4	605-50-5	2012/12/19	Toxic for reproduction (Article 57 c)	ED/169/2012		Х
Bis (2-methoxyethyl) phthalate (DMEP)	204-212-6	117-82-8	2011/12/19	Toxic for reproduction (Article 57 c)	ED/77/2011		Х
Diisobutyl phthalate (DIBP)	201-553-2	84-69-5	2010/01/13	Toxic for reproduction (Article 57 c)	ED/68/2009		Х
Benzylbutyl phthalate (BBP)	201-622-7	85-68-7	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		X
Bis (2-ethylhexyl) phthalate (DEHP)	204-211-0	117-81-7	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		Х
Dibutyl phthalate (DBP)	201-557-4	84-74-2	2008/10/28	Toxic for reproduction (Article 57 c)	ED/67/2008		X





Annex XIV - Authorization list

22 entries (updated 17 April 2013)



Substance	EC	CAS	Sunset date	Latest	Exempted (categories of) uses	details
name	number	number		application		
Diisobutyl phthalate (DIBP)	201-553-2	84-69-5	21/02/2015	21/08/2013		
Dibutyl phthalate (DBP)	201-557-4	84-74-2	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X
Bis(2-ethylhexyl) phthalate (DEHP)	204-211-0	117-81-7	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X
Benzyl butyl phthalate (BBP)	201-622-7	85-68-7	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X

WARNING: so far, DEHP is the most effective plasticizer to be used in a key medical device such as BLOOD BAGS



Annex XVII - Restriction list

(adopted 22 june 2009)



Substance	EC	CAS	Sunset date	Latest	Exempted (categories of) uses	details
name	number	number		application		
Diisobutyl phthalate (DIBP)	201-553-2	84-69-5	21/02/2015	21/08/2013		
Dibutyl phthalate (DBP)	201-557-4	84-74-2	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X
Bis(2-ethylhexyl) phthalate (DEHP)	204-211-0	117-81-7	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X
Benzyl butyl phthalate (BBP)	201-622-7	85-68-7	21/02/2015	21/08/2013	Uses in the immediate packaging of medicinal products covered under Regulation (EC) No 726/2004, Directive 2001/82/EC, and/or Directive 2001/83/EC.	X

WARNING: so far, DEHP is the most effective plasticizer to be used in a key medical device such as BLOOD BAGS BUT WILL NOT BE BANNED IN 2015 AS ORIGINALLY EXPECTED



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 The *in citro* LIFE-EDESIA approach: Biomarker-based, cell-specific bioassays as the best screening approach to build an Adverse Outcome Pathway for Endocrine Disruption

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Endocrine Active Substance / EAS

"a substance having the inherent ability to interact or interfere with one or more components of the endocrine system resulting in a biological effect, but need not necessarily cause adverse effects." EFSA Journal 2013;11(3):3132

Endocrine Disruptor / ED

"An endocrine disrupter is an exogenous substance or mixture that alters function(s) of the endocrine system and consequently causes adverse health effects in an intact organism, or its progeny, or (sub)populations." *WHO/IPCS 2002*

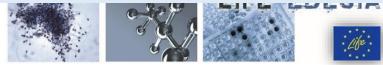
"EDs are EASs causing adverse effects mediated by endocrine mechanisms" Rovida, De Angelis, Lorenzetti. ALTEX 30, 2/13

In summary, **currently available definitions of "endocrine disrupter**" are **either** neutral in terms of specifying the toxicological relevance of the effects to be described, **or** they introduce the idea of adversity.

The former is in danger of being insufficiently discriminatory, the latter shifts the problem to defining what adversity should mean in an endocrine context, which could be too restrictive and not inclusive enough.

At the core of this dilemma is the fact that "endocrine disruption" cannot presently be anchored to specific assay outcomes in a straightforward way.

STATE OF THE ART ASSESSMENT OF ENDOCRINE DISRUPTERS, ec.europa.eu/environment/endocrine/.../summary_state_science.pdf





> Endocrine Activity...

"endocrine activity as a collection of modes of action, potentially leading to adverse outcomes, rather than a (eco)toxicological hazard in itself."

EFSA Journal 2013;11(3):3132

> ... as a sum of different Mode of Actions

"A change in morphology, physiology, growth, reproduction, development or lifespan of an organism which results in impairment of functional capacity or impairment of capacity to compensate for additional stress or increased susceptibility to the harmful effects of other environmental influences". **Federal Institute for Risk Assessement (BfR), Berlin workshop 2009**"

OECD 2002

OECD Conceptual Framework for the Testing and Assessment of Endocrine Disrupting Chemicals

Note: Document prepared by the Secretariat of the Test Guidelines Programme based on the agreement reached at the 6th Meeting of the EDTA Task Force

)2	Level 1 Sorting & prioritization based upon existing information	Physical & chemical properties, e.g., MW, reactivity, volatility, biodegradability Human & environmental exposure, e.g., production volume, release, use patterns Hazard, e.g., available toxicological data				
	Level 2 In vitro assays providing mechanistic data	ER, AR, TR receptor binding affinity High Through Put Prescreens Transcriptional activation Aromatase & Steroidogenesis in vitro Aromatase & Steroidogenesis in vitro Aryl hydrocarbon receptor recognition/binding QSARs; Others (as appropriate)				
	Level 3 In vivo assays providing data about single endocrine Mechanisms and effects	Uterotrophic Assay (estrogenic related) Hershberger Assay (androgenic related) Non-receptor mediated hormone function Others (e.g. thyroid)				
	Level 4 In vivo assays providing data about multiple endocrine mechanisms and effects	Enhanced OECD 407 (endpoints based on endocrine mechanisms) Alle and female pubertal assay Adult intact male assay				
	Level 5 In vivo assays providing data on effects from endocrine & other mechanisms	*1-generation assay (TG415 enhanced) *2-generation assay (TG416 enhanced) *Reproductive screening (TG421 enhanced) *Combined 28 day/reproduction screening test (TG 422 enhanced)				

In vitro Nuclear Receptor binding & regulation of gene transcription IS SUFFICIENT TO DEFINE: ✓ AN ENDOCRINE ACTIVITY ? ✓ AN ADVERSE EFFECT ?





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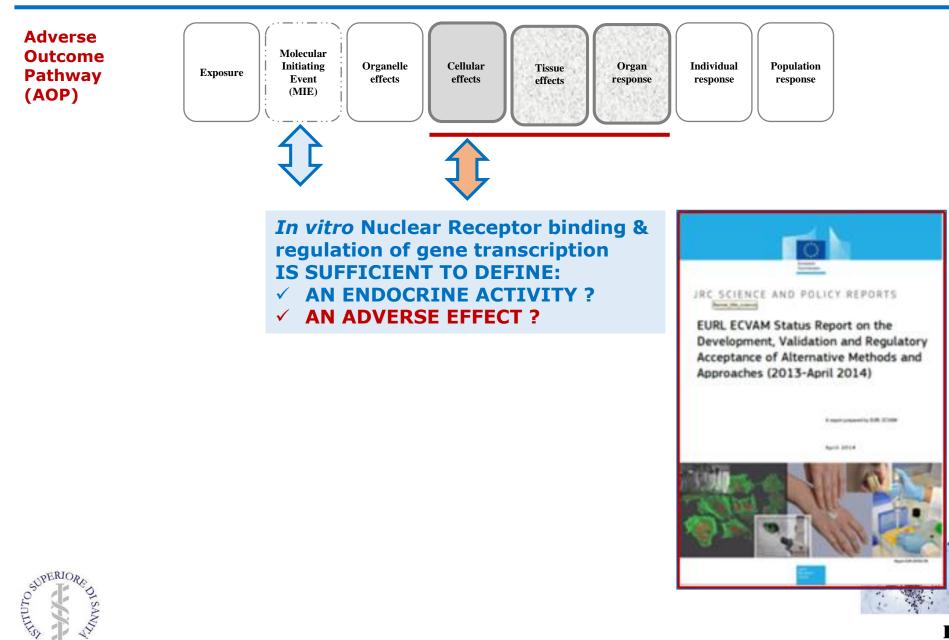
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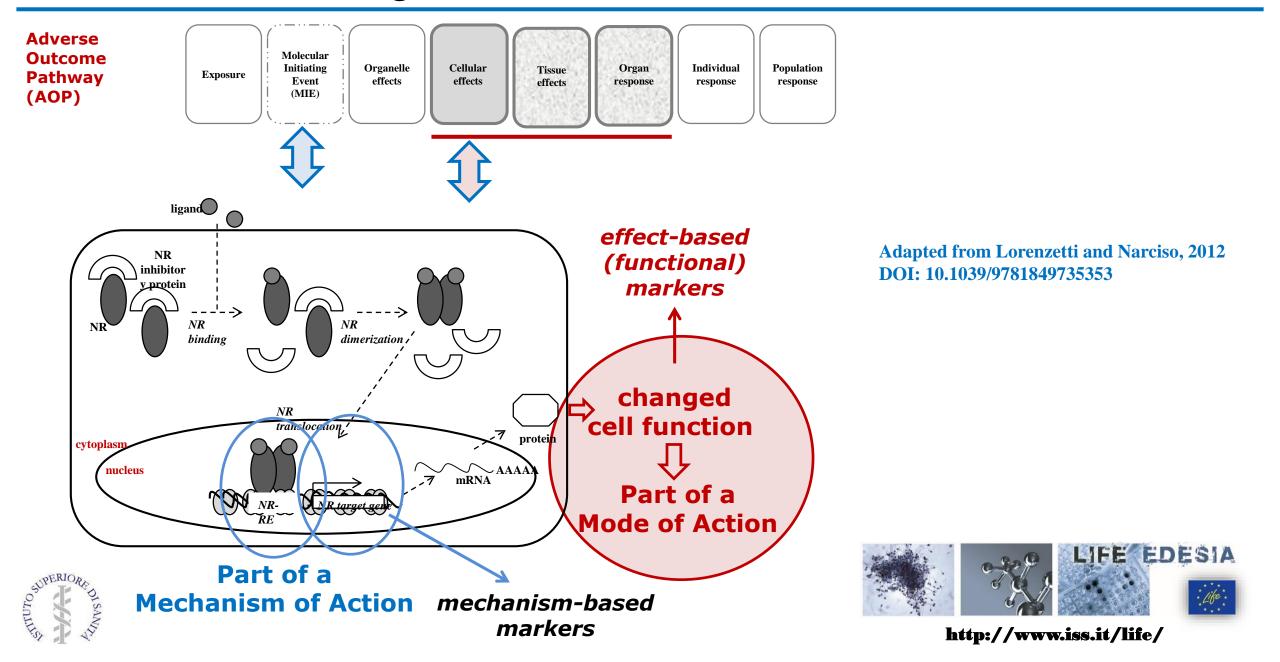


ED-screening: mechanism-based *versus* effect-based - 1





ED-screening: mechanism-based *versus* effect-based - 2



OUTLINE

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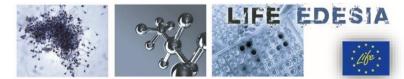
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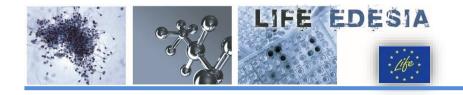
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The AIM

To characterize *in vitro*, in multiple ED-targeted human cells, if the alternatives identified in previous actions are "less toxic" considering their endocrine disrupting properties.

The APPROACH

- ✓ Multiple clinical-, physiologically-relevant endpoints will be used to translate the *in vitro* toxicological profile to a suitable prediction for human health.
- ✓ Endocrine disrupting properties of the selected alternative substances to phthalates, bisphenols and parabens - in comparison with their reference EDCs - will be assessed by an integrated set of *in vitro* battery test of alternative methods that, although not yet validated, have been so far accepted by the academic community as directly focusing on specific and reliable endocrine endpoints.
- ✓ Well characterized human-derived cell lines representing recognized tissue target of the EDESIA EDCs to be substituted have been selected.





Action A1



CHEMICO-PHYSICAL PROPERTIES

(e.g., solubility by the **ACD/Solubility DB** and lipophilicity by the octanol-water partition coefficient **LogP** and by the apparent partition coefficient D for dissociative systems **Log D**) assessed on phthalates, bisphenols and parabens, and their potential substitutes, listed on www.iss.it/life (data available on request)

TOX PROPERTIES

(e.g., cancerogenic, mutagenic, binding to nuclear receptors) assessed by tools implemented in the VEGA platform on phthalates, bisphenols and parabens, and their potential substitutes, listed on www.iss.it/life (data available on request)

MOLECULAR DOCKING

performed on phthalates, bisphenols and parabens, and their potential substitutes, listed on www.iss.it/life, versus selected Nuclear Receptors (NRs), such as the Androgen Receptor AR, the Estrogen Receptors ERa and ERb (*data available on request*), and on the Peroxisome Proliferator-Activated Receptor PPARg (*in progress*)

Endocrine Disruptors *in silico / in vitro* **Evaluation and Substitution for Industrial Applications**

QUANTITATIVE STRUCTURE-ACTIVITY RELATIONSHIP (QSAR)

performed on phthalates, bisphenols and parabens, and their potential substitutes, listed on E12 ENV/IT/000633 www.iss.it/life, versus selected NRs, namely AR and ERa, using i) a CART model also implemented in the VEGA platform, ii) SARpy model developed on the basis of the CERAPP Collaborative Estrogen Receptor Activity Prediction Project) dataset, iii) the German Federal Environment Agency (UBA) ED-scan for ER and AR binders, and iv) the Estrogen Receptor Binding (www.iss.it/life/ and the rtER Expert System ver.1 – USEPA profilers available to investigate Eds in the OECD





The EXPERIMENTAL MODELS

Endocrine disrupting properties will be tested only in cell lines of human sources, whose employment is well proven, integrating tests representative of the endocrine activities of the following human tissues:

- prostate, to investigate ED androgen receptor (AR)-mediated effects on the male reproductive system
- Lorenzetti et al., 2010, Reprod.Toxicol. 30:25-30
- Lorenzetti et al., 2011, Ann Ist Super Sanita. 47(4):429-44
- trophoblast, to investigate ED estrogen receptor (ER)-mediated effect on the placenta and hence the transgenerational effects on nutrient exchange between motherchild
- Morck et al., 2010, Reprod.Toxicol. 30:131
- Lorenzetti et al., 2011, Ann Ist Super Sanita. 47(4):429-44
- biver, to investigate multiple ED nuclear receptor (NR)-mediated effects on the programming of the metabolic syndrome.

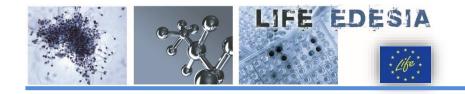


Grasselli et al., 2013, Chemosphere. 91(8):1123-9



http://www.iss.it/life/

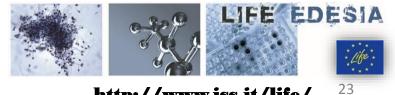
22



The METHODS

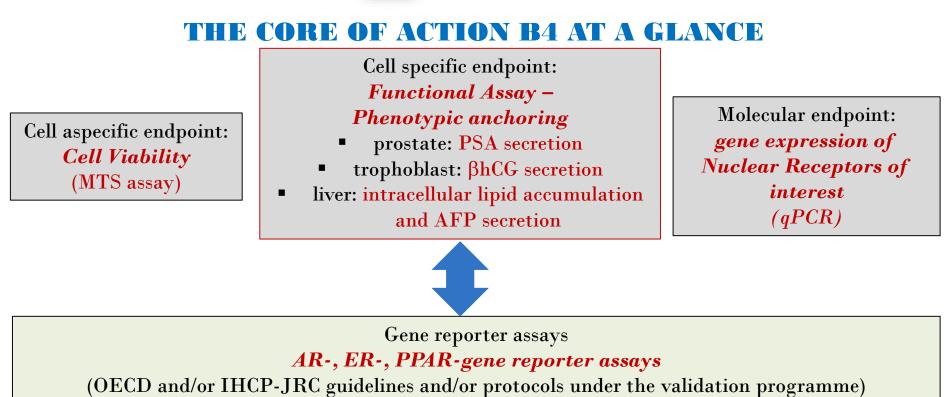
Within the three model systems will be used in parallel an approach based on the use of three cell-based assays:

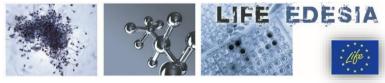
- a) cytotoxicity/cell proliferation test (by MTS assay, a metabolic-based assay relying on mitochondrial functionality) that will assist to distinguish if the changes observed in the other tested endpoints (b. and c.) are cell specific or merely due to cell damages;
- b) assessment of gene expression (by real time RT-PCR) of a set of nuclear receptors (NRs) known molecular mediators of the actions of parabens, bisphenols and phthalates;
- c) "phenotypic anchoring" by measurements of clinical-, physiologically-relevant endpoints: to allow the assessment of the physiological relevance of detected change in NR gene expression by the measurement of cell specific cellular biomarkers already employed in clinical practice and well recognized as endocrine endpoints modulated by both endogenous and exogenous hormone-like stimuli.









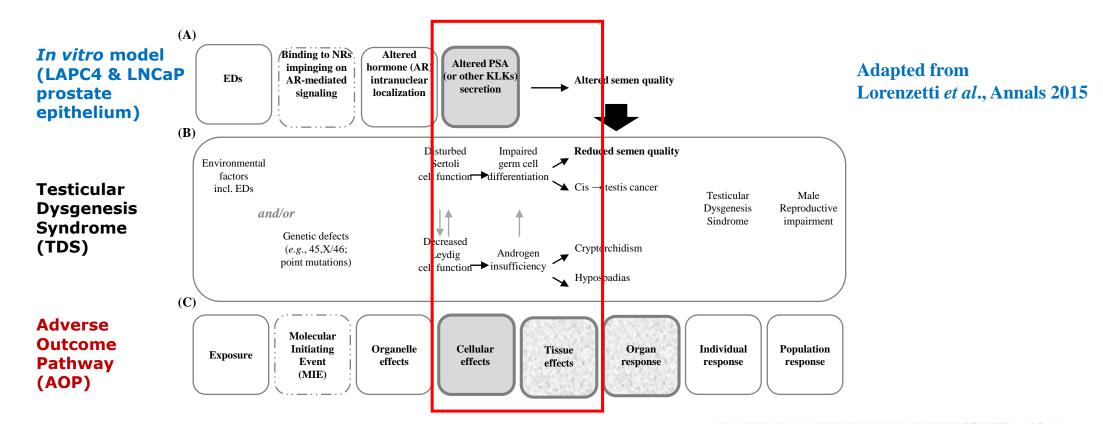




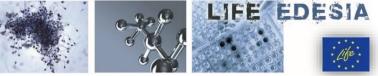
http://www.iss.it/life/ ²⁴

Biomarker-based, cell-specific bioassays as the best screening approach to build an Adverse Outcome Pathway for Endocrine Disruption - 1

Integrating the LIFE-EDESIA Endocrine-based Screening using Cell-specific, ED-targeted Functional Biomarkers (C) within the Testicular Dysgenesis Syndrome (B) as an Adverse Outcome Pathway (A).

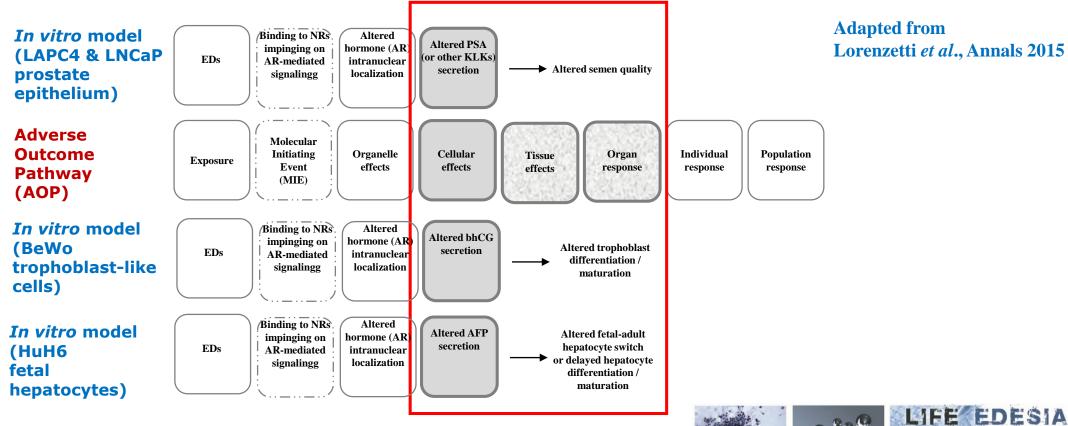






Biomarker-based, cell-specific bioassays as the best screening approach to build an Adverse Outcome Pathway for Endocrine Disruption . 2

Integrating the LIFE-EDESIA Endocrine-based Screening using Cell-specific, ED-targeted Functional Biomarkers as an Adverse Outcome Pathway.

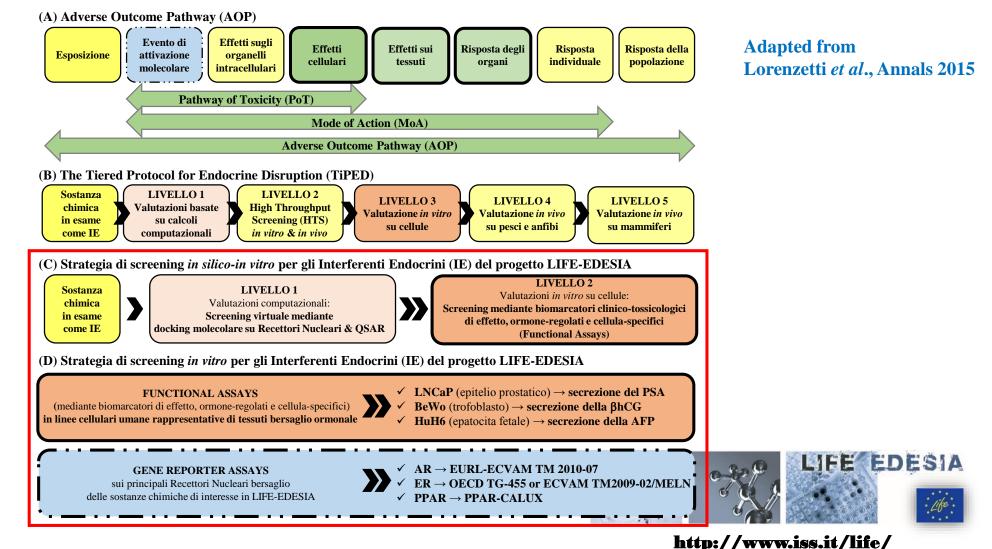






Biomarker-based, cell-specific bioassays as the best screening approach to build an Adverse Outcome Pathway for Endocrine Disruption - 3

Integrating the LIFE-EDESIA Endocrine-based Screening using Cell-specific, ED-targeted Functional Biomarkers (C, D) within the Testicular Dysgenesis Syndrome (B) as an Adverse Outcome Pathway (A).





CONCLUSIONS

- ✓ So far, only the *in silico* part (Actions A1 and B1-B3) of the LIFE-EDESIA project has been completed: Actions A1 data are available online, whereas Actions B1-B3 data will be soon available online.
- ✓ The *in vitro* part (Action B4) of the LIFE-EDESIA approach has been already set up for the 3 *in vitro* experimental models selected to perform our biomarker-based, cellspecific bioassays to screen for ED-like alternatives.
- ✓ The last but most important part (Action B5) that deals with demonstration of the industrial applicability of the selected LIFE-EDESIA alternatives will start at the end of Action B4.

Endocrine Disruptors *in silico / in vitro* Evaluation and Substitution for Industrial Applications

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